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FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) Stand For Truth, Inc.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00592337 </div>
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Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM

DD

YYYY

Full Name of Payee Digital Freedom, LLC		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>12 / 09 / 2015</div> </div>	
Mailing Address PO Box 65448		Amount <div> <div></div> <div>42000.00</div> </div>	
City Washington	State DC	Zip Code 20035	Transaction ID : SE.4108 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>12 / 09 / 2015</div> </div>
Purpose of Expenditure Digital advertising	Category/ Type	004	
Name of Federal Candidate Ted Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought	<div> <div></div> <div>0.00</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

Full Name of Payee SRCP Media, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 10 / 2015	
Mailing Address 201 North Union Street Suite 200		Amount 192594.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4107 Date of Disbursement or Obligation MM / DD / YYYY 12 / 08 / 2015
Purpose of Expenditure Radio advertising		Category/ Type 004	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures.....	234594.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	234594.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

D Eric Lycan

[Electronically Filed]

Date _____

Signature

FEC Schedule E (Form 24/28) Rev. 09/2013